



# Tuberculosis Control

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<http://idph.iowa.gov/immtd/tb>

Protecting & Improving  
the Health of Iowans



It's a disease as old as antiquity. Archeologists have found mummies with signs of it. Your grandparents or great-grandparents called it "consumption." Today, we know the disease as tuberculosis, or TB. Although an ancient disease, it's still around and the Iowa Department of Public Health's Tuberculosis Control program continues the fight against TB.

You may not know that Christmas Seals were introduced to help raise funds to fight TB. The organization that pioneered the Christmas Seals, the National Tuberculosis Association, became what's now known as the American Lung Association.

Less than two decades ago, Iowa averaged 65 TB cases each year. Now, through the efforts of the TB Control program, the number of cases has fallen to an annual average of 46 cases.

## Did you know?

Patients who do not take their medications correctly or who are improperly treated can develop a virtually untreatable form of TB.

## Why is the TB Control program important to protecting and improving the health of Iowans?

- Tuberculosis remains a public health problem in Iowa with an average of 46 cases reported each year.
- Over a thousand Iowans are diagnosed with latent TB infection each year. Latent TB infection (LTBI) can lead to future cases of TB disease.
- Infectious cases of TB must be treated to prevent others from becoming infected.

## Which Iowa Public Health Goals are we working to achieve?

Prevent epidemics & the spread of disease

Strengthen the health infrastructure

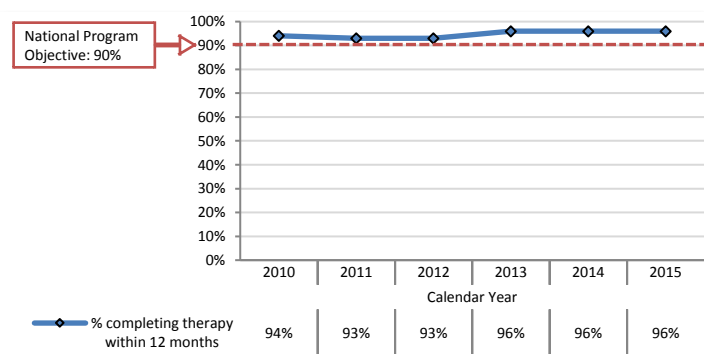
Promote healthy living

## What do we do?

- Provide funding for local health departments to give TB tests, treatment, and chest x-rays for TB patients.
- Provide funding for the University of Iowa Hygienic Lab to perform state of the art TB laboratory testing.
- Maintain a system to ensure positive TB lab tests are reported to IDPH for surveillance and disease investigation.
- Advise healthcare providers who evaluate and treat Iowans with TB and LTBI.

## How do we measure our progress?

- ❶ Percent of patients with newly diagnosed TB, for whom therapy for one year or less is indicated, who complete therapy within 12 months.



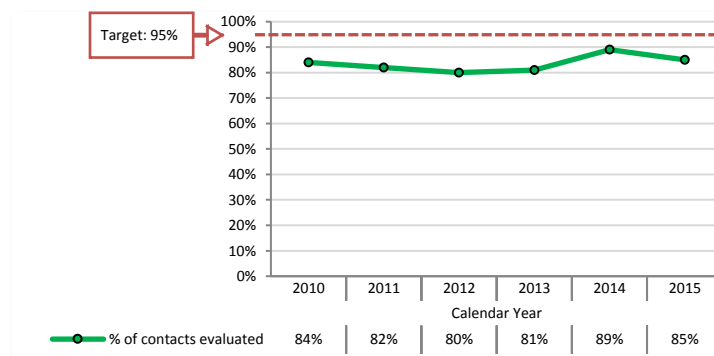
Data Source: CDC software program - Tuberculosis Information Management System. Data are compiled annually, but possibly not complete until 9 months into the next year.

**How are we doing?** Iowa consistently meets or exceeds the national program objective of 90%. Local health departments assure completion of therapy for patients with infectious TB by providing directly observed therapy (DOT). This means a designated health care worker watches the patient take each dose of medication. This is the **only** way to ensure completion of therapy and thus stop the transmission of disease. DOT is the **standard of care** in the most effective TB control programs in the country. The TB Control Program provides incentive funding to local public health departments to perform DOT.

Consequences of incomplete therapy include:

- treatment failure
- relapse
- multiple drug resistant tuberculosis (MDR-TB).

- ❷ Percent of contacts to sputum AFB-smear positive TB cases evaluated for infection and disease.



Data Source: CDC software program - Tuberculosis Information Management System. Data are compiled annually, but possibly not complete until 9 months into the next year.

**How are we doing?** Iowa prioritizes the evaluation of those with recent and significant exposure to infectious TB and is above the national average for this objective. All infectious cases require a contact investigation by the local health department to identify contacts who:

- Have TB disease so that they can be given treatment and further transmission can be stopped.
- Have Latent TB Infection (LTBI) so that they can be given treatment for LTBI, and active disease can be prevented.

## What can Iowans do to help?

1. Maintain a healthy lifestyle, especially when visiting other countries where TB is common. For more information, go to [www.cdc.gov/travel/yellowBookCh4-TB.aspx](http://www.cdc.gov/travel/yellowBookCh4-TB.aspx).
2. Local public health should follow recognized standards when caring for TB patients. For more information, go to <http://idph.iowa.gov/imm/tb/local-public-health>.
3. Clinicians should be vigilant about the early diagnosis of TB and ensure proper treatment. For more information, go to [www.cdc.gov/tb/pubs/PDA\\_TBGuidelines/default.htm](http://www.cdc.gov/tb/pubs/PDA_TBGuidelines/default.htm).

## Expenditures

General fund & federal funds: K15-1601; 0153-1602

|                    | State Fiscal Year<br>2015 Actual | State Fiscal Year<br>2016 Actual | State Fiscal Year<br>2017 Estimate |
|--------------------|----------------------------------|----------------------------------|------------------------------------|
| State funds        | \$55,993                         | \$55,019                         | \$56,444                           |
| Federal funds      | \$335,309                        | \$343,334                        | \$345,944                          |
| <b>Total funds</b> | <b>\$391,302</b>                 | <b>\$398,353</b>                 | <b>\$402,388</b>                   |
| FTEs               | 1.97                             | 1.68                             | 1.95                               |

**Note:** Funding information is intended to provide an overview of funding related to the program area. It does not include all federal and state requirements and/or restrictions for the use of funds. Contact the program area for more detailed budget information.